NOV O 8 2004

AMEN	Docket No. 45060-00002USPT					
Application 09/8350		Filing I April 13,		Examiner C. E. Harriso	7 • • • • • • • • • • • • • • • • •	
oplicant(s): Pete	er Freyhult					
SYSTE vention: DATA	M AND METH	OD FOR ORG	ANIZING TW	O AND THREE DI	MENSIONAL IMAGE RECEIVE	
ransmitted here	with is an ame		above-identifi	ed application.	NOV 1 0 200	
		CLAIM	S AS AMENI	DED	Technology Center	
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate		
Total Claims	21	- 21 =		x	0.00	
Total Claims		- 3 =		X	0.00	

Independent Claims	3	- 3	=		×		0.00
Multiple Depend	lent Claims (ch	eck if ap	plicab	(e)			
Other fee (pleas		980.00					
TOTAL ADDIT	IONAL FEE F	OR THIS	AME	NDMENT:			980.00
x Large Entity					Sma	all Entity	
No additiona	al fee is require	d for thi	s ame	ndment.			
	ge Deposit Acc				in the amou	nt of \$	·
X A check in the	ne amount of \$	9	30.00	to cove	the filing fe	e is enclos	sed.
Payment by	credit card. F	orm PT0)-2038	s is attached.			
X The Director as described	is hereby auth below. A dur			-	•	ccount No.	10-0447
x Credit a	ny overpayme	nt.					
x Charge a	any additional fil	ling or ap	plication	on processing	fees require	d under 37	CFR 1.16 and 1.17.
Ross T. Robins		-			Dat	ed: <u>No</u>	ovember 5, 2004
Attorney Reg. N							
JENKENS & GI 5 Houston Cent 1401 McKinney Houston, Texas (214) 965-7300	ter v, Suite 2600 s 77010	ROFES	SION	AL CORPOR	ATION		

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Dated: November 5, 2004

Signature:

(Carol Martin)

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FEE TRANSMITTAL	ŀ				T f	olete if Kn		-
	ŀ		ation I	Numb		09/83500		CEN
for FY 2004			Filing Date			April 13, 2		
Effective 10/01/2003, Patent fees are subject to annual revision.	ŀ		Named			Peter Fre		10V 1 0
	\neg		iner Na	ime		C. E. Hari		
Applicant claims small entity status. See 37 CFR 1.27		Art Ur				45000.00	Techn	ology Cer
OTAL AMOUNT OF PAYMENT (\$) 980.00		Attorn	ey Doo	ket No	<u> </u>	45060-00	0020SPT	
METHOD OF PAYMENT (check all that apply)				FEE	CALCUL	LATION (co	ntinued)	
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Deposit Account:	Large	Entity	Small	Entity				
Number 10-0447	Fee Code	Fee (\$)	Fee Code	Fee (\$)	-	Fee Desc	ription	Fee Paid
Deposit Jenkens & Gilchrist, a	1051	130	2051	65	Surcharge	- late filing fee	e or oath	
Account Name Professional Corporation he Director is authorized to: (check all that apply)		50	2052	25	Surcharge sheet.	arge - late provisional filing fee or cover		
Charge fee(s) indicated below X Credit any overpayments	1053	130	1053	130		sh specification	า	
Charge any additional fee(s) or any underpayment of fee(s)	1812	2,520	1812	2,520	For filing a r	request for ex p	arte reexamination	,
Charge fee(s) indicated below, except for the filing fee		920*	1804	920*	Requesting	sting publication of SIR prior to		
to the above-identified deposit account.	1805	1,840*	1805	1,840*			TION OF SIR	
FEE CALCULATION	1251	110	2251	55		for reply within	first month	
. BASIC FILING FEE	1252	420	2252			• •	second month	
arge Entity Small Entity Fee Fee Fee Fee <u>Fee Description</u> Fee Paid	1253	950	2253			for reply within		980.009
ode (\$) Code (\$)	1254	1,480	2254			for reply within		
001 770 2001 385 Utility filing fee	1255	2,010 330	2255 2401			for reply within	i fifth month	\vdash
002 340 2002 170 Design filing fee	1401	330	2401		Notice of A	oppear of in support o	f an anneal	
004 770 2004 385 Reissue filing fee	1403	290	2403			or oral hearing	i all appeal	
005 160 2005 80 Provisional filing fee	1451		1451		•	•	lic use proceedin	ng
SUBTOTAL (1) (\$) 0.00	1452	110	2452	55	Petition to	revive – unavo	oidable	
305101A2(1) (4) 0.00	1453	1,330	2453	665	Petition to	revive - uninte	ntional	
. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1501	1,330	2501	665	-	e fee (or reissu	ie)	\vdash
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Code (\$) Fee Description	1809	40	8021 2809	40 385	property (ti	imes number of bmission after	of properties)	
201 86 2201 43 Independent claims in excess of 3		770			(37 CFR 1.		-	\vdash
1203 290 2203 145 Multiple dependent claim, if not paid	1810		2810	385	examined	(37CFR 1.129	(b))	_,
204 86 2204 43 ** Reissue independent claims over original patent	1801	770	2801	385		or Continued E or expedited ex	xamination (RCE camination	⁼' ├──┤
205 18 2205 9 ** Reissue claims in excess of 20	1802		1802	900		application		
and over original patent		fee (spe	• ·					
SUBTOTAL (2) (\$) 0.00 *or number previously paid, if greater; For Reissues, see above	*Redu	uced by I	Basic Fi	ling Fee	Paid	SUBTO	TAL (3) (\$)	980.00
SUBMITTED BY						(Complete	(if applicable))	
Ioma (Print/Turns) Poes T. Pohingon		ration No		.031			(214) 965-7	393
	(Attorn	ey/Agent				+	·	
Signature						Date	November 5	o, 2004
I hereby certify that this correspondence is being deposited to MS BCE Commissions for Patente B O. Box 1450 Ale	with th	ne U.S.	Postal	Servic	e as First	Class Mail, i	n an envelope	addressed
to: MS RCE, Commissioner for Patents, P.O. Box 1450, Ale Dated: November 5, 2004 Signature:	xandr	na, VA RY	t^{22313}	-1450, M	on the dai	te snown dei ' '~	low. (Carol I	Martin)
Dates. Hoveliber of 2004 Signature.				- 			(Saior)	